Federal Election Commission INCULIAL Det. 15, 20 Re: Q3 report For C00534016 Sir or Madam, Our group still has not gothen out of the planning stage, and we have not yet received for disbursed any funds, As in past quarterly reports, I have put "zeroes" in all of the appropriate boxes, Also as in past reports, I have left schedules "K" through "L" blank, as those schedules appear to not be applicable to our group. yours very truly, hilt 95@ yahoo, com 2-671-0909

HIGH: HMH: NGMO

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS

For Other Than An Authorized Committee

RECEIVED

2814 CCT 20 AH 11:58

FEC MAIL CENTER
Office Use Only

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If to over the line		12FE4M5	
Exposing M	air 1x 1151751	PIAIC	<u> </u>	<u> </u>	
			<u> </u>		
ADDRESS (number and street)	15:0,3 W. H	appfile/	1 Diriv	<u>e </u>	
Check if different than previously reported. (ACC)	April 203 Arrhingit	on Heiyi	n:T:S-J 1	IL 600	10 <i>1</i> 41-1711191
2. FEC IDENTIFICATION N	UMBER ▼	CITY	. S	TATE A	ZIP CODE A
c 0.0.53.4.0	16	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Ordy)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1) (a)	Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	
July 15 Quarterly Report ((c) 12-Day PRE-Election Report for t	[]	المسوا	General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (1		/ 6 6 7 7		in the
January 31 Year-End Report (YE)E	Election on			State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Elect Report for t	Arroll	30G)	Runoff (30R)	Special (30S)
Termination Report	t	Election on	/ DID / Y		in the State of
5. Covering Period	7 61 20	through	h <u>0</u> 4	3.0 2.0	14
I certify that I have examined the	~ 1 . ~	est of my knowledge a	nd belief it is true	, correct and comple	te.
Type or Print Name of Treasure	er John P.	H1/T			
Signature of Treasurer	fla P. M	htt.	Dat	te / D / j	5 2014
NOTE: Submission of false, error	eous, or incomplete infor	mation may subject the	person signing this	Report to the penalti	es of 2 U.S.C. §437g,
Office Use	}				FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Marx 15] From: Report Covering the Period: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.0.0. January 1, (b) Cash on Hand at 0.0.0.0 Beginning of Reporting Period..... 0.0.00 0.0.0.0 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 0.0.0.0 0.0.0.0 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period 0.0.0 0.0.0 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.0.0.0 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on [0]0[0]0Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

HUDEL HELL ROLLS

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Exposing Marxists PAC				
	eport Covering the Period: From:	0.1 2.014 To:	09 30 2014	
	í. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees	and the second s		
	(i) Itemized (use Schedule A)	0,0,0,0	0000	
	(ii) Unitemized(iii) TOTAL (add		0000	
	Lines 11(a)(i) and (ii)	0.0.0.0	0.000	
	(b) Political Party Committees	0.0.0.0	0,000	
	(such as PACs)	0.0.00	0.0.0.0	
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.0.0.0	0.0.0.0	
12.	Transfers From Affiliated/Other Party Committees	0.0.0.0	0.0.00	
13.	All Loans Received	0.0.00		
	Loan Repayments Received	0.0.0.0	000.0	
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other	0,00,0	0.0.0.0.0	
17	Political Committees	0.00.0	0.0.0.0	
	(Dividends, Interest, etc.)	0.0.0.0	0.0.0.0	
	(from Schedule H3)		0.000	
	(b) Levin Funds (from Schedule H5)	0.0.0.0	0.000	
	(c) Total Transfers (add 18(a) and 18(b))	0.0.0.0	0.0.0.0	
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	Λ Λ Λ Λ	$\wedge \wedge \wedge \wedge$	
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)			

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Saleman Tear-to-Date
	(i) Federal Share	0.0.0.0	0.0.0.0
	(ii) Non-Federal Share	0.0.0.0	0.0.0.0
	(b) Other Federal Operating Expenditures	42,44	
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	0.000	0000
22.	Transfers to Affiliated/Other Party Committees	0000	00.00
23.	Contributions to Federal Candidates/Committees		
	and Other Political Committees	00.00	00.00
	Independent Expenditures (use Schedule E)	2020	
25.	(use Schedule E)		
	(use Schedule F)	00.00	
26.	Loan Repayments Made	0.0.0.0	10000
	Loans Made	0.000	0000
<8.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.000	0000
	(b) Political Party Committees		0.000
	(such as PACs)	00.00	
	(d) Total Contribution Refunds		Annahumake tadioanilanahumakan kanahumakan
	(add Lines 28(a), (b), and (c))▶		L
29.	Other Disbursements	00.00	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0000	2000
	ľ		
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	000	0.000
	With Federal Funds	0.000	00.00
	(c) Total Federal Election Activity (add	$\bigcap \bigcap \bigcap$	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶ ▮		0.000
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, , , , , , , , , , , , , , , , , , , ,	L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0000	0000
	<u>k</u>		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form	1 3X (Rev. 02/2003)	of Dispursements	Page 5
	utions/Operating Ex- enditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
(from Line 11(c	ons (other than loans)	00.00	0000
34. Total Contributi (from Line 28(d	on Refunds 1))	0.000	00.00
	ns (other than loans) 34 from Line 33)	00-00	0000
	Operating Expenditures (i) and Line 21(b))▶	0000	0000
37. Offsets to Oper	rating Expenditures	00.00	0000
38. Net Operating	. • .	10000	00.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Ar or	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
7	NAME OF COMMITTEE (In Full)	_			
\geq	Exposing Marxists	PAC			
Α.	Full Name (Last, First, Middle Initial)		Date of Receipt		
	Mailing Address		3 B / 6 B / Y Y Y Y Y Y		
	City	State Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			
	Name of Employer	Occupation			
_	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼			
В.	Full Name (Last, First, Middle Initial)		Date of Receipt		
•	Mailing Address				
	City	State Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	The state of the s		
	Name of Employer	Occupation			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
 C.	Full Name (Last, First, Middle Initial)		Date of Receipt		
	Mailing Address		3 3 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
	City	State Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	and the state of t		
	Name of Employer	Occupation			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼			
s	SUBTOTAL of Receipts This Page (optional)	•	DO DO		
T	OTAL This Period (last page this line number of	only)	0.000		

	CHEDOLL B (I LC I OIII 3A)	Use separate schedule(s)	FOR LINE		PAGE OF
IT	EMIZED DISBURSEMENTS	for each category of the	(check only	/ one) □ 22 □ 23 □	
		Detailed Summary Page	27	28a 28b	24 25 26 28c 29 30b
Ar	ny information copied from such Reports and Statem	nents may not be sold or us	ed by any person	on for the purpose of	soliciting contributions
or	for commercial purposes, other than using the nam	ne and address of any politic	cal committee to	solicit contributions t	rom such committee.
\	NAME OF COMMITTEE (In Full)	21-			
/	Exposing Marxists	PHG			
_	Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·			
Α.				Date of Disbursen	
	Mailing Address			1000	
	City	State Zip Code			
	Purpose of Disbursement			Amount of Each D	isbursement this Period
	Candidate Name		Category/ Type		
	Office Sought: House Disburserr	_			
		Primary General Other (specify) ▼		-:	
	State: District:	· (-1 2/ •			
	Full Name (Last, First, Middle Initial)				
В.				Date of Disbursem	ent
	Mailing Address			NAM / DO	
	City	State Zip Code			· · · · · · · · · · · · · · · · · · ·
	Purpose of Disbursement			Amazina - E	tabaan aa
	Candidate Name		Cottone		isbursement this Period
		j	Category/ Type		
	Office Sought: House Disburser				
	├ ─┤ │ ├ ─┤	Primary ☐ General Other (specify) ▼			
	State: District:				
_	Full Name (Last, First, Middle Initial)			D-4- / D:	
C.				Date of Disbursem	ent
	Mailing Address				A CARALLA
	City	State Zip Code			·
	Purpose of Disbursement			A	
	Candidate Name		Category/ Type	Amount of Each Di	isbursement this Period
	Office Sought: House Disbursem	nent For:	.,,,,,		P
	<u> </u>	Primary General			
	State: District:	Other (specify) ▼	1		
Ş	UBTOTAL of Disbursements This Page (optional)				0000
-	OTAL This Period (last page this line number only).				0000
•	the state of the s				

SCHEDULE C	(FEC	Form	3X)
LOANS			

HEDULE C (FEC Form 3X)		
ANS	Use separate schedul for each category of t Detailed Summary Pa	the
ME OF COMMITTEE (In Full)	Detailed Guillinary 1 a	ige · · · · · · · · · · · · · · · · · ·
Exposing Marxists PA	9C	
LOAN SOURCE Full Name (Last, First, Middle Initia	J)	Election:
		Primary General
Mailing Address		Other (specify) ▼
City State	ZIP Code	
Original Amount of Loan Cumula		alance Outstanding at Close of This Period
TERMS	Date Due Interest Ra	ate Secured:
Date Incurred	Date Die	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan S	Source	
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	Samelhaneshamalamakan wikan disensikan akan akan ak
City State ZIP C	(4	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP C	· · · · · · · · · · · · · · · · · · ·	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	But the section of the section of the section of
City State ZIP C		
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP C	ode Guaranteed Outstanding:	
	-	
UBTOTALS This Period This Page (optional)	Description of the second of t	0000

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

reactar Election Commission, Washington, D.C. 20100		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
Exposing Marxists PAC		C00534016
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
Full Name		microst rate (Arri)
		<u> </u>
Mailing Address		ATT OF A VEVENT
	Date Incurred or Established	
		E H / DFD / YEVEV
City State Zip Code	Date Due	
A. Has loan been restructured? No Yes	If yes, date originally incurred	AAN / DAD / YAYAYA
B. If line of credit,	Total	
	Outstanding	
Amount of this Draw:	Balance:	
C. Are other parties secondarily liable for the debt incurre	ed?	
No Yes (Endorsers and guarantors mu	st be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the k	pan: real estate, personal	What is the value of this collateral?
property, goods, negotiable instruments, certificates of	deposit, chattel papers,	
stocks, accounts receivable, cash on deposit, or other	similar traditional collateral?	
No Yes If yes, specify:		
		Does the lender have a perfected security
		interest in it? No Yes
E. Are any future contributions or future receipts of intere	=	What is the estimated value?
collateral for the loan? No Yes If yes, s	pecify:	
A depository account must be established pursuant	Location of account:	
to 11 CFR 100.82(e)(2) and 100.142(e)(2).		
Date account established:	Address:	
HRM / DED / VEVEVEY		
	City, State, Zip:	
F. If neither of the types of collateral described above was	s pledged for this loan, or if the	amount pledged does not equal or exceed
the loan amount, state the basis upon which this loan	was made and the basis on wh	ich it assures repayment.
G. COMMITTEE TREASURER		DATE
Typed Name		DATE
Signature		Haw : Day / And Add
Oignature		
H. Attach a signed copy of the loan agreement.		-
I. TO BE SIGNED BY THE LENDING INSTITUTION:		
 To the best of this institution's knowledge, the ter 	ms of the loan and other inform	ation regarding the extension of the loan
are accurate as stated above.	luding interest rate) as more for	rovoble of the time they there is no in a first
 The loan was made on terms and conditions (inc similar extensions of credit to other borrowers of 	comparable credit worthiness.	rotatile at the time than those imposed for
III. This institution is aware of the requirement that a complied with the requirements set forth at 11 CF	loan must be made on a basis	which assures repayment, and has
AUTHORIZED REPRESENTATIVE	n 100.02 and 100.142 in makir	DATE
Typed Name		DAIE
Signature Title	9	- Land A A Lead A Mark
- S.g	-	
		i i

SCHEDULE D (FEC Form 3X)	(Use separate	PAGE OF
DEBTS AND OBLIGATIONS		FOR LINE NUMBER:
Excluding Loans	for each numbered line)	(check only one) 9
NAME OF COMMITTEE (In Full)		10
Exposing Marxists PAC		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	Debt (Purpose):
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This Period	Outstandi	ing Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Noture of F	Ocht (Rumaca):
B. Full Name (Last, First, Middle Initial) of Debtor of Creditor	Nature of L	Debt (Purpose):
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	Pebt (Purpose):
·		
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This Period	Outstandii	ng Balance at Close of This Period
	23	
1) SUBTOTALS This Period This Page (optional)		2002
2) TOTALS This Period (last page this line number only)	>	0.0.0.0
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)		0000
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page	only) ▶	0000

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Explaing Marxists PAC Check if 24-hour report 48-hour report New report Amends report	C00534016
Check if 24-hour report 48-hour report New report Amends report	nt filed on
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	/ 0.0 / 0.0
	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
	M = M / D = D / Y = Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Office Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
, and the second	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	0000
(b) SUBTOTAL of Uniternized Independent Expenditures	0.000
(c) TOTAL Independent Expenditures	0.0.0.0
Under penalty of perjury I certify that the independent expenditures reported herein were rewith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	not made in cooperation, consultation, or concert either, or (if the reporting entity is not a political
Signature Date	1.0 1.5 201.4
	FEC Schedule E (Form 3X) Rev. 07/2011

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) × DOS ÎNA Full Name of Subordinate Committee Has your dommittee been designated to make coordinated expenditures by a political party committee? X NO ☐ YES If YES, name the designating committee: Mailing Address ZIP Code City State Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date Zip Code State City Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type Date Zip Code State Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate SUBTOTAL of Expenditures This Page (optional).... TOTAL This Period (last page this line number only)......

PAGE

OF

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Exposing Marxists PAC
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
B. Separate Segregated Funds and Nonconnected Committees Flat Minimum Federal Percentage
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check Or
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check Or If the committee is spending more than 50% federal funds, indicate ratio below
Flat Minimum Federal Percentage If the committee will allocate using the flat minimum percentage of 50% federal funds, check Or If the committee is spending more than 50% federal funds, indicate ratio below Federal

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

ILLUCATION NATIOS				
IAME OF COMMITTEE (In Full) EXDISING MAIXISTS PAC				
NATION FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT				
Methods of allocation:				
 FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised. 	hod" where the federal pro	oportion of		
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated accommon where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public commisted federal and nonfederal candidates, regardless of whether there is a rare allocated using a time/space method.	fit derived by federal candi nunications or voter drives	idates from the ac- that refer to both		
ACTIVITY OR EVENT IDENTIFIER				
	FEDERAL %	NONFEDERAL %		
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	%	%		
New Revised Same as Previously Reported				
ACTIVITY OR EVENT IDENTIFIER				
	FEDERAL %	NONFEDERAL %		
ACTIVITY IS:	The state of the s			
Fundraising Direct Candidate Support CHECK IF THE BATIO IS:	%	%		
New Revised Same as Previously Reported				
Canto as 1 reviously reported				
ACTIVITY OR EVENT IDENTIFIER				
	FEDERAL %	NONFEDERAL %		
ACTIVITY IS:	paragraph of the same of the s			
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	%	- %		
New Revised Same as Previously Reported				
ACTIVITY OR EVENT IDENTIFIER				
	FEDERAL %	NONFEDERAL %		
ACTIVITY IS:	Same Same and windings			
Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	1 %	1.2.2.1%		
New Revised Same as Previously Reported				
ACTIVITY OR EVENT IDENTIFIER				
ACTIVITY IS:	FEDERAL %	NONFEDERAL %		
Fundraising Direct Candidate Support	Q/	^		
CHECK IF THE RATIO IS:	%	1%		
New Revised Same as Previously Reported				
		·		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL SI			
ACTIVITY IS:	FEDERAL %	NONFEDERAL %		
Fundraising Direct Candidate Support	0/	0/		
CHECK IF THE RATIO IS:	%	**************************************		
New Revised Same as Previously Reported	.			

PAGE

OF

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	OF		
FOR LIN	F 182 OF	EORM.	37

NAME OF COMMITTEE (In Full)	.	
Exposing Marxists	PAC	
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
BREAKDOWN OF TRANSFER RECEIVED		And the second second
i) Total Administrative		
ii) Camaria Vatas Briva		Secretaria de la constitución de
ii) Generic Voter Drive		
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event lo	dentifier)	
	မို့ မ ိုးသန်းသောင်သောက်လူသောက်လောက်လေးမြီးသလ်လေးမြီးသလုံးသေး ထိုင္သေ	
a)		
b)		***************************************
		The state of the s
	traising	and the street with the street of the street
v) Direct Candidate Support (List Activity or		
a)		52.50
	transfer of transfer of the second of the se	
b)		
c) Total Amount Transferred For Direct Can	didate Support	
		and the second second second second second
vi) Public Communications Referring Only to		
TOTALS	FOR BREAKDOWN OF TRANSFER RECEIVE	
TOTAL This Period (Administrative)	and and a second and a second and a second and	There a manufacture is the manufacture is a second
TOTAL This Period (Generic Voter Drive)		A CONTRACTOR OF THE PROPERTY O
TOTAL THIS PERIOD (GENERIC VOICE DIVE)		
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		ig garandenn denn denn den senten versten versten versten versten versten versten versten versten versten versten den versten
TOTAL THIS FERIOU (Direct Fundraising)		Parademante and Maria and and American
TOTAL This Period (Direct Candidate Support)	The state of the s	
TOTAL This Period (Public Communications Referring	q	
TAINE UND L'EURO (L'ERRIC COMMUNICATIONS HEIGHT	ag only to rung/minimum.	Annihanda and and and and and and and
TOTAL This Period (Total Amount Transferred)		Annual Consideration of the consideration of the constitution of t

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

IPAGE	OF
	E ota OE FORM AV

_					FOR LINE 21a OF FORM 3X
N/	EXDOLINA MACXISTS PA	۲.			
A.	Full Name (Last, First, Middle Initial)			Allocated Activity or Event:	
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:			Category/ Type	
			NOVEEDER		Date
	FEDERAL SHARE	Romalineositos †	NONFEDERAL	SHARE	= TOTAL AMOUNT
				Acres de La Constitución de la c	
<u> </u>	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:				Allocated Activity or Event Year-To-Date
				2	
	Activity or Event Identifier:			Category/ Type	Date
	FEDERAL SHARE -	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
c.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:	<u>. </u>		promous 21 militario de su collectiva	Allocated Activity or Event Year-To-Date
					The section of the se
	Activity or Event Identifier:			Category/ Type	Date
	FEDERAL SHARE	+	NONFEDERAL		Transitioned Incoming Property Commission
	PEDERAL SHARE	lucadanda L	NONFEDERAL	nacional moleco OHVUE	TOTAL AMOUNT
				Anne med Danish	The second control of
SI	JBTOTAL of Allocated Federal and NonFederal A	ctivity This	Page		
	FEDERAL SHARE	-	NONFEDERAL	SHARE	= TOTAL AMOUNT
	2			3 3 3	
T	OTAL This Period (last page for each line only)(Fe	ederal sha	re to 21(a)(i) and	NonFederal sha	are to 21(a)(ii))
	FEDERAL SHARE	**************************************	NONFEDERAL		TOTAL AMOUNT
				A B A B A B A B A B A B A B A B A B A B	

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

			FOR LINE 18b OF FORM 3X
NAME OF COMMITTEE (In Full) Exposing Marxists	PA'C		
LXposing / MIXISIS	7710		
NAME OF ACCOUNT	DATE OF RECEIPT		TOTAL AMOUNT TRANSFERRED
	Hank / Lone	· ALLALA	
BREAKDOWN OF THIS TRANSFER			
i) Voter Registration		VOTER REGIST	RATION
Total Amount Transferred for Vot	er Registration		A - 270. A
		V	OTER ID
ii) Voter ID		and water the same	
Total Amount Transferred for Vot	er ID		4-4
			GOTV
iii) GOTV		-	
Total Amount Transferred for GC	TV		
			GENERIC CAMPAIGN ACTIVITY
iv) Generic Campaign Activity		~	
Total Amount Transferred for Ge	neric Campaign Activity	L	
NAME OF ACCOUNT	DATE OF RECEIPT		TOTAL AMOUNT TRANSFERRED
		- Seekantin Andrews	
	handred handson	hander of the later of	
DESTRUCTION OF THE TRANSFER	•		
BREAKDOWN OF THIS TRANSFER		VOTED DECIRT	PATION
i) Voter Registration	Seminaria de la composição de la composi	VOTER REGISTI	TATION
Total Amount Transferred for Vot	er Registration		
			(0.75.7.19
(i) Voter ID		Anna Contract to the second se	OTER ID
Total Amount Transferred for Vot	er ID		e v e vere
Total Amount Transferred to vot		in the second	or the self-resident of the se
iii) GOTV			GOTV
Total Amount Transferred for GC	TV	-	
total Amount Transferred for GC	/		
to Compile Compile Activity			GENERIC CAMPAIGN ACTIVITY
(v) Generic Campaign Activity	noria Campaiga Astivity		
Total-Amount Transferred for Ge	nenc Campaign Activity	L	
<u> </u>			
TOTALS FOR E	REAKDOWN OF TRANS	SFER RECEIVED (L	ast Page Only)
			İ
TOTAL This Devied (Veter Designation)			
TOTAL This Period (Voter Registration)			
		Broadezednomiconoloni	
TOTAL This Period (Voter ID)			
, ,			
		- Proposition of the last of t	min m know in medican decomposed to medican de
TOTAL This Period (GOTV)			AT - 2 - 2 - 2 - 2 - 2
TOTAL This Beyind (Constitution	Activity)		
TOTAL This Period (Generic Campaign	nouvity)		
TOTAL This Period (Total Amount of Tra	ansfers Received)	***************************************	
(1000)	- · · · · · · · · · · · · · · · · · · ·		Same Committee of the March and Charles of the Committee
		_	

PAGE

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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF
FOR LINE 30a OF FORM 3X

IAME OF COMMITTEE (In Full)	^		-
Exposing Marxists P.	HC		
A. Full Name (Last, First, Middle Initial) / Full Org			Type of Allocated Activity or Event: Voter Registration
			Voter ID Generic Campaign
Mailing Address			Allocated Activity or Event Year-To-Date
City State	Zip Code		
Purpose of Disbursement		Category/ Type	Date / D.D / Y.Y.Y.Y.
FEDERAL SHARE +	LEVIN SHA	RE	= TOTAL AMOUNT
B. Full Name (Last, First, Middle Initial) / Full Org	ganization Name		Type of Allocated Activity or Event:
			Voter Registration GOTV Voter ID Generic Campaign
Mailing Address			Allocated Activity or Event Year-To-Date
City State	Zip Code		The state of the s
Purpose of Disbursement		Category/ Type	Date
FEDERAL SHARE +	LEVIN SHA	RE	= TOTAL AMOUNT
C. Full Name (Last, First, Middle Initial) / Full Org	ganization Name		Type of Allocated Activity or Event: Voter Registration GOTV
			Voter ID Generic Campaign
Mailing Address			Allocated Activity or Event Year-To-Date
City State	Zip Code		
Purpose of Disbursement		Category/ Type	Date / Date
FEDERAL SHARE +	LEVIN SHAI	RE	= TOTAL AMOUNT
SUBTOTAL of Shared Federal and Levin Activity Th	is Page		
FEDERAL SHARE +	LEVIN SHAI	RE	= TOTAL AMOUNT
FOTAL This Period (last page for each line only)(Fer FEDERAL SHARE	deral share to 30(a)(i) and	Levin share to	30(a)(ii)) TOTAL AMOUNT
Secretary of the second secretary of the second sec	LEVIN SHAF	dE	
OTAL This Period for the Levin Share		the dead to the	The state of the s

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

	E OF COMMITTEE (In Full) XD8 Sing Marxists E/OF ACCOUNT	PAG	
IVAIVI	E/OF ACCOUNT		
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)		
	(b) Unitemized		The state of the s
	(c) Total	and a second	And the state of t
2.	OTHER RECEIPTS		
3.	TOTAL RECEIPTS(Add Lines 1c and 2)		
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule I-B)		
	(a) Voter Registration		
	(b) Voter ID		
	(c) GOTV		
	(d) Generic Campaign		
	(e) Total		
5.	OTHER DISBURSEMENTS		
6.	TOTAL DISBURSEMENTS		
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)		
8.	RECEIPTS(trom Line 3)		
9.	SUBTOTAL(Add Lines 7 and 8)		
10.	DISBURSEMENTS		
11.	ENDING CASH ON HAND		and a contract the second
	(Subtract Line 10 From Line 9)	Bear Standard Control of the Control	

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

Use separate schedule(s) for each category of the Aggregation Page

PAGE

FOR LINE NUMBER: (check only one)

OF

		Aggregation Page	(check only one)1a2	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) Exposing Marxists PA			
Α.	Full Name (Last, Errst, Middle Initial) / Full Organization Name		Date of Receipt	
	Mailing Address City State	Zip Code	Amount of Each Receipt this Period	
	Name of Employer or Principal Place of Business		Aggregate Year-to-Date	
	Occupation		and the second s	
8.	Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address		Date of Receipt	
	City State	Zip Code	Amount of Each Receipt this Period	
	Name of Employer or Principal Place of Business		Aggregate Year-to-Date	
	Occupation Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt	
C.	Mailing Address		Date of Receipt	
	City State	Zip Code	Amount of Each Receipt this Period	
	Name of Employer or Principal Place of Business Occupation		Aggregate Year-to-Date	
_	Full Name (Last, First, Middle Initial) / Full Organization Name		Date of Receipt	
D.	Mailing Address			
	City State	Zip Code	Amount of Each Receipt this Period	
	Name of Employer or Principal Place of Business Occupation		Aggregate Year-to-Date	
—	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number only)		The second secon	

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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the

	FOR LINE NUMBE	ER:	PAG	<u>E</u>	OF
i	(check only one)			\Box	
1			4a	4c	5
			4b	∐ 4₫	

OF LEVIN FUNDS	Aggregation Page	4a 4c 5 4b 4d		
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and	may not be sold or used by any pers address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) EXPOSING MARXISTS F	AC .			
Full Namé (Last, First, Middle Initial) / Full Organization A.	Name	Date of Disbursement		
Mailing Address				
City State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		And the state of t		
Full Name (Last, First, Middle Initial) / Full Organization B.	Name	Date of Disbursement		
Mailing Address				
City State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement				
Full Name (Last, First, Middle Initial) / Full Organization C.	Name	Date of Disbursement		
Mailing Address				
City State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement				
Full Name (Last, First, Middle Initial) / Full Organization D.	Name	Date of Disbursement		
Mailing Address				
City State	Zìp Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		terrediction de la constitución de		
Full Name (Last, First, Middle Initial) / Full Organization E.	Name	Date of Disbursement		
Mailing Address				
City State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement				
SUBTOTAL of Disbursements This Page (optional)	•			
TOTAL This Period (last page this line number only)		45.		

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMMISSION The FEC added this page to the end of this filing to in	OMING DOCUMENTS
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USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
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USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Office	Date of Receipt ce
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ate of Receipt or Postmarked
J.	1420/2014
PREPARER (8/2013)	DATE PREPARED